

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

*William Kirkland  
1335 Compton Rd  
Cincinnati, Ohio  
45231*

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*William Kirkland* ☐ Agent ☐ Addressee

B. Received by (Printed Name)

*William Kirkland*

C. Date of Delivery

*12/15/03*

D. Is delivery address different from item 1? ☐ Yes ☐ No

If YES, enter delivery address below:

3. Service Type

- ☐ Certified Mail ☐ Express Mail
- ☐ Registered ☐ Return Receipt for Merchandise
- ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

2. Article Number

(Transfer from service label)

7001 2510 0008 6347 9344

PS Form 3811, August 2001

Domestic Return Receipt

102596-02-M-0835

UNITED STATES POSTAL SERVICE

First-Class Mail  
Postage & Fees Paid

USPS  
G-10



HOLIDAYS

• Sender: Please print your name, address, and ZIP+4 in this box. U.S. Postals required.

OFFICE OF THE CLERK  
U. S. DISTRICT COURT  
Rm. 324 U. S. Courthouse  
5th & Walnut Streets  
Cincinnati, Ohio 45203

HK

67-100-368 (Dec. 27)